

APPLICATION FOR FEDERAL ASSISTANCE

1. TYPE OF SUBMISSION <i>Application</i> <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		<i>Preapplication</i> <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		2. DATE SUBMITTED	Applicant Identifier
				3. DATE RECEIVED BY STATE	State Applicant Identifier
				4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5. APPLICANT INFORMATION					
Legal Name:				Organizational Unit:	
Address (give city, county, state, and zip code):				Name and telephone number of person(s) to be contacted on matters involving this application (give area code) Project:	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div> <div><input type="text"/></div><div><input type="text"/></div> <div>—</div> <div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div> </div>				7. TYPE OF APPLICANT: (enter appropriate letter in box) <input type="text"/> <div> <div>A. State</div><div>H. Independent School Dist.</div> <div>B. County</div><div>I. State Controlled Institution of Higher Learning</div> <div>C. Municipal</div><div>J. Private University</div> <div>D. Township</div><div>K. Indian Tribe</div> <div>E. Interstate</div><div>L. Individual</div> <div>F. Intermunicipal</div><div>M. Profit Organization</div> <div>G. Special District</div><div>N. Other (Specify) _____</div> </div>	
8. TYPE OF APPLICATION: <div> <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision </div> If Revision, enter appropriate letter(s) in box(es): <input type="text"/> <input type="text"/> <div> <div>A. Increase Award</div><div>B. Decrease Award</div><div>C. Increase Duration</div> <div>D. Decrease Duration</div><div>Other (specify): _____</div> </div>				9. NAME OF FEDERAL AGENCY:	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div> <div><input type="text"/></div><div><input type="text"/></div> <div>•</div> <div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div> </div> TITLE: _____				11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:	
12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):					
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:			
Start Date	Ending Date	a. Applicant b. Project			
15. ESTIMATED FUNDING:				16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. NO. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW			
b. Applicant	\$				
c. State	\$				
d. Local	\$				
e. Other	\$				
f. Program Income	\$	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No			
g. TOTAL	\$				
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.					
a. Signature of Authorized Representative & Date			b. Title		c. Telephone number

**APPALACHIAN REGIONAL COMMISSION
STATE OF ALABAMA
PREAPPLICATION GUIDELINES**

Project Title:

Project Grantee:

Contact Person and Telephone:

County(ies) to be Served: List each county and its designation (e.g. transitional, distressed, competitive)

Basic Agency: All construction projects require a basic agency. Not required for non-construction projects

Goal/Strategy: Identify the primary ARC Goal and State Strategy which project will address

Purpose: 1-2 sentence statement describing overall purpose of proposed project

Funding:

	<u>Amount</u>	<u>%age</u>	<u>Source</u>
ARC	\$200,000	36 %	
Federal	200,000	36 %	RD Grant
State	100,000	18 %	CDBG
Local	50,000	9 %	RD Loan
Local	10,000	1 %	Grantee
Total	\$560,000	100 %	

Description: Description of major activities to be conducted under grant proposal. The description should address who, what, where, when and how for each major activity.

Rationale:

- Critical circumstances that compel project to be funded
- Local, regional and/or state need for project
- Problems and/or issues that project will alleviate

Benefit:

- Results and accomplishments to be derived from project

- Other non-quantifiable benefits (e.g. new partnerships, improved standard of living, etc.)

Output/Outcome:

- Identify output and outcome measurements (as defined by ARC)

Summarize status of match sources:

Sustainability of the project: Describe plans to sustain project

Include Maps: